

Fill in this information to identify your case:

Debtor 1 TD00 L Culbreath
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number 18-11155
(If known)

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets Value of what you own
1. <i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$ <u>155,000</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$ <u>11,079.40</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$ <u>166,079.40</u>

Part 2: Summarize Your Liabilities

	Your liabilities Amount you owe
2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$ <u>152,758</u>
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ <u>10,000</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	+ \$ <u>7518.21</u>
Your total liabilities	\$ <u>170,276.21</u>

Part 3: Summarize Your Income and Expenses

4. <i>Schedule I: Your Income</i> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ <u>3834.00</u>
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)	
Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ <u>3349.31</u>

Debtor 1

First Name Middle Name Last Name

Case number (if known)

18-11155

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

~~3331.00~~
3266.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)

\$ 0

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

\$ 10,000

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

\$ 0

9d. Student loans. (Copy line 6f.)

\$ 7518.21

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

\$ 0

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

+ \$ 0

9g. Total. Add lines 9a through 9f.

\$ 17518.21

Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number
(If known) _____

☐ Check if this is an amended filing.

18-11155

Official Form 106A/B

Schedule A/B Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In.

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

1.1. 701 Buttonwood Street
Street address, if available, or other description

Norristown PA 19401
City State ZIP Code

Montgomery
County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 155,000.00 \$ 155,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.2. _____
Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

Debtor 1	Todd	L.	Culbreath	Case number (if known) _____
	First Name	Middle Name	Last Name	

1.3. _____
Street address, if available, or other description

City _____ State _____ ZIP Code _____

County _____

What is the property? Check all that apply.

☐ Single-family home

☐ Duplex or multi-unit building

☐ Condominium or cooperative

☐ Manufactured or mobile home

☐ Land

☐ Investment property

☐ Timeshare

☐ Other _____

Who has an interest in the property? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____

Current value of the portion you own? \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. → \$ 155,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
- ☒ Yes

3.1. Make: VW

Model: Jetta

Year: 2003

Approximate mileage: 240000

Other information:

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ 1,502.00

Current value of the portion you own? \$ 1,502.00

If you own or have more than one, describe here:

3.2. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____

Current value of the portion you own? \$ _____

Debtor 1	<u>Todd</u>	<u>L.</u>	<u>Culbreath</u>	Case number (if known) _____
	First Name	Middle Name	Last Name	

<p>3.3. Make: _____ Model: _____ Year: _____ Approximate mileage: _____ Other information: <div style="border: 1px solid black; height: 20px; width: 100%;"></div></p>	<p>Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions)</p>	<p><small>Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.</small></p> <table border="0" style="width: 100%;"><tr><td style="width: 50%;">Current value of the entire property?</td><td style="width: 50%;">Current value of the portion you own?</td></tr><tr><td>\$ _____</td><td>\$ _____</td></tr></table>	Current value of the entire property?	Current value of the portion you own?	\$ _____	\$ _____
Current value of the entire property?	Current value of the portion you own?					
\$ _____	\$ _____					

<p>3.4. Make: _____ Model: _____ Year: _____ Approximate mileage: _____ Other information: <div style="border: 1px solid black; height: 20px; width: 100%;"></div></p>	<p>Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions)</p>	<p><small>Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.</small></p> <table border="0" style="width: 100%;"><tr><td style="width: 50%;">Current value of the entire property?</td><td style="width: 50%;">Current value of the portion you own?</td></tr><tr><td>\$ _____</td><td>\$ _____</td></tr></table>	Current value of the entire property?	Current value of the portion you own?	\$ _____	\$ _____
Current value of the entire property?	Current value of the portion you own?					
\$ _____	\$ _____					

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No
☐ Yes

<p>4.1. Make: _____ Model: _____ Year: _____ Other information: <div style="border: 1px solid black; height: 40px; width: 100%;"></div></p>	<p>Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions)</p>	<p><small>Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.</small></p> <table border="0" style="width: 100%;"><tr><td style="width: 50%;">Current value of the entire property?</td><td style="width: 50%;">Current value of the portion you own?</td></tr><tr><td>\$ _____</td><td>\$ _____</td></tr></table>	Current value of the entire property?	Current value of the portion you own?	\$ _____	\$ _____
Current value of the entire property?	Current value of the portion you own?					
\$ _____	\$ _____					

If you own or have more than one, list here:

<p>4.2. Make: _____ Model: _____ Year: _____ Other information: <div style="border: 1px solid black; height: 40px; width: 100%;"></div></p>	<p>Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions)</p>	<p><small>Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.</small></p> <table border="0" style="width: 100%;"><tr><td style="width: 50%;">Current value of the entire property?</td><td style="width: 50%;">Current value of the portion you own?</td></tr><tr><td>\$ _____</td><td>\$ _____</td></tr></table>	Current value of the entire property?	Current value of the portion you own?	\$ _____	\$ _____
Current value of the entire property?	Current value of the portion you own?					
\$ _____	\$ _____					

<p>5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here</p>	<p>→ \$ <u>1,502.00</u></p>
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Debtor 1 Todd L. Culbreath
 First Name Middle Name Last Name

Case number (if known) _____

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No
☒ Yes. Describe. Personal furniture and furnishings \$ 1,000.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No
☒ Yes. Describe. TV, DVD Player, radios, computer, printer combo \$ 500.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No
☒ Yes. Describe. Five silver dollars \$ 100.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No
☒ Yes. Describe. Golf clubs \$ 50.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No
☐ Yes. Describe. _____ \$ _____

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No
☒ Yes. Describe. Personal clothing \$ 500.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No
☒ Yes. Describe. watches, ring \$ 75.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☐ No
☒ Yes. Describe. House cat \$ 1.00

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No
☐ Yes. Describe. _____ \$ _____

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$ 2,226.00

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes Cash: \$ 50.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes Institution name:

17.1. Checking account:	<u>BB&T</u>	\$ <u>200.00</u>
17.2. Checking account:	<u>BB&T</u>	\$ <u>100.00</u>
17.3. Savings account:	_____	\$ _____
17.4. Savings account:	_____	\$ _____
17.5. Certificates of deposit:	_____	\$ _____
17.6. Other financial account:	_____	\$ _____
17.7. Other financial account:	_____	\$ _____
17.8. Other financial account:	_____	\$ _____
17.9. Other financial account:	_____	\$ _____

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes Institution or issuer name:

_____	\$ _____
_____	\$ _____
_____	\$ _____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☐ No

☒ Yes. Give specific information about them.

Name of entity:	% of ownership:	
<u>Zerns Hearing Aid Center LLC</u>	<u>100.00 %</u>	\$ <u>7,000.00</u>
_____	<u>0.00 %</u>	\$ _____
_____	<u>0.00 %</u>	\$ _____

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No
☐ Yes. Give specific information about them..... Issuer name: _____ \$ _____
 _____ \$ _____
 _____ \$ _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No
☐ Yes. List each account separately. Type of account: Institution name: _____
 401(k) or similar plan: _____ \$ _____
 Pension plan: _____ \$ _____
 IRA: _____ \$ _____
 Retirement account: _____ \$ _____
 Keogh: _____ \$ _____
 Additional account: _____ \$ _____
 Additional account: _____ \$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No
☐ Yes Institution name or individual: _____
 Electric: _____ \$ _____
 Gas: _____ \$ _____
 Heating oil: _____ \$ _____
 Security deposit on rental unit: _____ \$ _____
 Prepaid rent: _____ \$ _____
 Telephone: _____ \$ _____
 Water: _____ \$ _____
 Rented furniture: _____ \$ _____
 Other: _____ \$ _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No
☐ Yes Issuer name and description: _____ \$ _____
 _____ \$ _____
 _____ \$ _____

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ No

☒ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value:
 \$ _____
 \$ _____
 \$ _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No

☐ Yes. Give specific information. \$ _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim. \$ _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No

☐ Yes. Describe each claim. \$ _____

35. Any financial assets you did not already list

☒ No

☐ Yes. Give specific information. \$ _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here →

\$ 7,351.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

☒ No

☐ Yes. Describe. \$ _____

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☒ No

☐ Yes. Describe. \$ _____

Debtor 1 Todd L. Culbreath Case number (if known) _____
First Name Middle Name Last Name

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☒ No
☐ Yes. Describe. _____ \$ _____

41. Inventory

☒ No
☐ Yes. Describe. _____ \$ _____

42. Interests in partnerships or joint ventures

☒ No
☐ Yes. Describe Name of entity: _____ % of ownership: _____
_____ 0.00% \$ _____
_____ 0.00% \$ _____ 0.00
_____ 0.00% \$ _____

43. Customer lists, mailing lists, or other compilations

☒ No
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
☐ No
☐ Yes. Describe _____ \$ _____

44. Any business-related property you did not already list

☒ No
☐ Yes. Give specific information _____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here _____ →

\$ _____ 0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☐ No
☐ Yes _____ \$ _____

Debtor 1 Todd L. Culbreath Case number (if known) _____
First Name Middle Name Last Name

48. Crops—either growing or harvested

☐ No
☐ Yes. Give specific information _____ \$ _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

☐ No
☐ Yes _____ \$ _____

50. Farm and fishing supplies, chemicals, and feed

☐ No
☐ Yes _____ \$ _____

51. Any farm- and commercial fishing-related property you did not already list

☐ No
☐ Yes. Give specific information. _____ \$ _____

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here _____ →

\$ 0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No
☐ Yes. Give specific information. _____
\$ _____
\$ _____
\$ _____

54. Add the dollar value of all of your entries from Part 7. Write that number here _____ →

\$ 0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 _____ → \$ 155,000.00

56. Part 2: Total vehicles, line 5 \$ 1,502.00

57. Part 3: Total personal and household items, line 15 \$ 2,226.00

58. Part 4: Total financial assets, line 36 \$ 7,351.00

59. Part 5: Total business-related property, line 45 \$ 0.00

60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00

61. Part 7: Total other property not listed, line 54 + \$ 0.00

62. Total personal property. Add lines 56 through 61. _____
\$ 11,079.00 Copy personal property total → + \$ 11,079.00

63. Total of all property on Schedule A/B. Add line 55 + line 62. _____
\$ 166,079.00

Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
 First Name Middle Name Last Name

Debtor 2
 (spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number
 (if known) _____

☐ Check if this is an amended filing.

Official Form 106C

Schedule C: The Property You Claim As Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>701 Buttonwood Street</u> Line from <i>Schedule A/B</i> : <u>1.1</u>	\$ <u>155,000.00</u>	<input type="checkbox"/> \$ <u>2,953.34</u> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(1)</u>
Brief description: <u>VW</u> Line from <i>Schedule A/B</i> : <u>3.1</u>	\$ <u>1,502.00</u>	<input checked="" type="checkbox"/> \$ <u>1,502.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(2)</u>
Brief description: <u>Personal furniture and f</u> Line from <i>Schedule A/B</i> : <u>6</u>	\$ <u>1,000.00</u>	<input checked="" type="checkbox"/> \$ <u>1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(3)</u>

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

Part 2. Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: <u>TV, DVD Player, radios.</u> Line from Schedule A/B: <u>7</u>	\$ <u>300.00</u>	<input checked="" type="checkbox"/> \$ <u>500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(3)</u>
Brief description: <u>Personal clothing</u> Line from Schedule A/B: <u>11</u>	\$ _____	<input checked="" type="checkbox"/> \$ <u>500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(3)</u>
Brief description: <u>watches, ring</u> Line from Schedule A/B: <u>12</u>	\$ <u>75.00</u>	<input checked="" type="checkbox"/> \$ <u>75.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(3)</u>
Brief description: <u>Cash</u> Line from Schedule A/B: <u>16</u>	\$ <u>50.00</u>	<input type="checkbox"/> \$ <u>50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(5)</u>
Brief description: <u>BB&T</u> Line from Schedule A/B: <u>17.1</u>	\$ <u>200.00</u>	<input type="checkbox"/> \$ <u>200.00</u> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(5)</u>
Brief description: <u>BB&T</u> Line from Schedule A/B: <u>17.2</u>	\$ <u>100.00</u>	<input type="checkbox"/> \$ <u>100.00</u> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(5)</u>
Brief description: <u>Zerns Hearing Aid Center</u> Line from Schedule A/B: <u>19.1</u>	\$ <u>7,000.00</u>	<input type="checkbox"/> \$ <u>7,000.00</u> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(5)</u>
Brief description: <u>Licensed hearing aid dea</u> Line from Schedule A/B: <u>27</u>	\$ <u>1.00</u>	<input type="checkbox"/> \$ <u>1.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(5)</u>
Brief description: <u>Golf clubs</u> Line from Schedule A/B: <u>9</u>	\$ <u>50.00</u>	<input type="checkbox"/> \$ <u>50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(3)</u>
Brief description: <u>House cat</u> Line from Schedule A/B: <u>13</u>	\$ <u>1.00</u>	<input checked="" type="checkbox"/> \$ <u>1.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 USC 522(d)(5)</u>
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: <u>House cat</u> Line from Schedule A/B: <u>13</u>	\$ <u>1.00</u>	<input checked="" type="checkbox"/> \$ <u>1.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number
 (If known) _____

☐ Check if this is an amended filing.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Homebridge Financial Services Inc. Creditor's Name 425 Phillips Blvd. Number Street Ewing NJ 08618 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 2/25/2011	Describe the property that secures the claim: Debtor's residence As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number 3 6 1 9	\$ <u>152,046.46</u>	\$ <u>155,000.00</u>
2.2 Meenan Oil Company Creditor's Name 9 West Broad Street Number Street Stamford CT 06902 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 4/7/2014	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number 0 8 7 9	\$ <u>711.87</u>	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ <u>152,758.33</u>	

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

KML Law Group
Name
701 Market Street
Number Street
Suite 5000
Philadelphia PA 19106
City State ZIP Code

On which line in Part 1 did you enter the creditor? 2.1

Last 4 digits of account number 3 6 1 9

Name

Number Street

City State ZIP Code

On which line in Part 1 did you enter the creditor?

Last 4 digits of account number

Name

Number Street

City State ZIP Code

On which line in Part 1 did you enter the creditor?

Last 4 digits of account number

Name

Number Street

City State ZIP Code

On which line in Part 1 did you enter the creditor?

Last 4 digits of account number

Name

Number Street

City State ZIP Code

On which line in Part 1 did you enter the creditor?

Last 4 digits of account number

Name

Number Street

City State ZIP Code

On which line in Part 1 did you enter the creditor?

Last 4 digits of account number

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/>	<u>Lloyd S. Markind, Esquire</u> Name <u>1060</u> <u>Andrew Drive</u> Number Street <u>Suite 170</u> <u>West Chester</u> <u>PA</u> <u>19380</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.2</u> Last 4 digits of account number _____
<input type="checkbox"/>	<u>Meenan Oil Company</u> Name <u>8301</u> <u>Lansdowne Avenue</u> Number Street <u>Upper Darby</u> <u>PA</u> <u>19082</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.2</u> Last 4 digits of account number _____
<input type="checkbox"/>	 Name Number Street City State ZIP Code	On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number _____
<input type="checkbox"/>	 Name Number Street City State ZIP Code	On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number _____
<input type="checkbox"/>	 Name Number Street City State ZIP Code	On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number _____
<input type="checkbox"/>	 Name Number Street City State ZIP Code	On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number _____

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/>	<div><div>Name</div><div>Number Street</div><div>City State ZIP Code</div></div>	<div>On which line in Part 1 did you enter the creditor? ____</div> <div>Last 4 digits of account number ____</div>
<input type="checkbox"/>	<div><div>Name</div><div>Number Street</div><div>City State ZIP Code</div></div>	<div>On which line in Part 1 did you enter the creditor? ____</div> <div>Last 4 digits of account number ____</div>
<input type="checkbox"/>	<div><div>Name</div><div>Number Street</div><div>City State ZIP Code</div></div>	<div>On which line in Part 1 did you enter the creditor? ____</div> <div>Last 4 digits of account number ____</div>
<input type="checkbox"/>	<div><div>Name</div><div>Number Street</div><div>City State ZIP Code</div></div>	<div>On which line in Part 1 did you enter the creditor? ____</div> <div>Last 4 digits of account number ____</div>
<input type="checkbox"/>	<div><div>Name</div><div>Number Street</div><div>City State ZIP Code</div></div>	<div>On which line in Part 1 did you enter the creditor? ____</div> <div>Last 4 digits of account number ____</div>
<input type="checkbox"/>	<div><div>Name</div><div>Number Street</div><div>City State ZIP Code</div></div>	<div>On which line in Part 1 did you enter the creditor? ____</div> <div>Last 4 digits of account number ____</div>

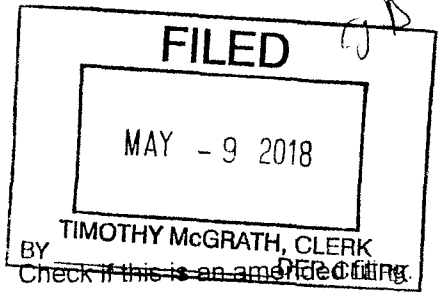
Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number _____
(If known)



Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
--	--	--

2.1

<p><u>Homebridge Financial Services Inc.</u> Creditor's Name</p> <p><u>425</u> <u>Phillips Blvd.</u> Number Street</p> <p><u>Ewing</u> <u>NJ</u> <u>08618</u> City State ZIP Code</p>	<p>Describe the property that secures the claim: <u>Debtor's residence</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p>	<p>\$ <u>152,046.46</u> \$ <u>155,000.00</u> \$ _____</p>
---	---	---

Who owes the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred 2/25/2011

Last 4 digits of account number 3 6 1 9

2.2

<p><u>Meenan Oil Company</u> Creditor's Name</p> <p><u>9</u> <u>West Broad Street</u> Number Street</p> <p><u>Stamford</u> <u>CT</u> <u>06902</u> City State ZIP Code</p>	<p>Describe the property that secures the claim: _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p>	<p>\$ <u>711.87</u> \$ _____ \$ _____</p>
---	---	---

Who owes the debt? Check one.

☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred 4/7/2014

Last 4 digits of account number 0 8 7 9

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 152,758.33

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

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<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <input type="checkbox"/> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">KML Law Group</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">701 Market Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Suite 5000</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> Philadelphia PA 19106 </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> City State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">On which line in Part 1 did you enter the creditor? <u>2.1</u></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number <u>3</u> <u>6</u> <u>1</u> <u>9</u></div>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <input type="checkbox"/> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> City State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">On which line in Part 1 did you enter the creditor? <u> </u></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u></div>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <input type="checkbox"/> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> City State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">On which line in Part 1 did you enter the creditor? <u> </u></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u></div>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <input type="checkbox"/> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> City State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">On which line in Part 1 did you enter the creditor? <u> </u></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u></div>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <input type="checkbox"/> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> City State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">On which line in Part 1 did you enter the creditor? <u> </u></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u></div>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <input type="checkbox"/> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> City State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">On which line in Part 1 did you enter the creditor? <u> </u></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u></div>

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Lloyd S. Markind, Esquire
Name
1060 Andrew Drive
Number Street
Suite 170
West Chester PA 19380
City State ZIP Code

On which line in Part 1 did you enter the creditor? 2.2

Last 4 digits of account number _ _ _ _

Meenan Oil Company
Name
8301 Lansdowne Avenue
Number Street
Upper Darby PA 19082
City State ZIP Code

On which line in Part 1 did you enter the creditor? 2.2

Last 4 digits of account number _ _ _ _

Name

Number Street

City State ZIP Code

On which line in Part 1 did you enter the creditor? _

Last 4 digits of account number _ _ _ _

Name

Number Street

City State ZIP Code

On which line in Part 1 did you enter the creditor? _

Last 4 digits of account number _ _ _ _

Name

Number Street

City State ZIP Code

On which line in Part 1 did you enter the creditor? _

Last 4 digits of account number _ _ _ _

Name

Number Street

City State ZIP Code

On which line in Part 1 did you enter the creditor? _

Last 4 digits of account number _ _ _ _

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐ _____
Name _____
Number _____ Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? ____

Last 4 digits of account number ____ _

☐ _____
Name _____
Number _____ Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? ____

Last 4 digits of account number ____ _

☐ _____
Name _____
Number _____ Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? ____

Last 4 digits of account number ____ _

☐ _____
Name _____
Number _____ Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? ____

Last 4 digits of account number ____ _

☐ _____
Name _____
Number _____ Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? ____

Last 4 digits of account number ____ _

☐ _____
Name _____
Number _____ Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? ____

Last 4 digits of account number ____ _

Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number
(If known) _____

☐ Check if this is an amended filing.

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.
 (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

2.1 Internal Revenue Service
Priority Creditor's Name

Number _____ Street _____
P.O. Box 7346

Philadelphia PA 19101-7346
City State ZIP Code

Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number 8 1 2 2

When was the debt incurred? 1/1/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Total claim	Priority amount	Nonpriority amount
\$ <u>8,000.00</u>	\$ <u>8,000.00</u>	\$ <u>0.00</u>

2.2 Pennsylvania Department of Revenue
Priority Creditor's Name

Dept. 280946
Number Street

Attn: Bankruptcy Division

Harrisburg PA 17128-0946
City State ZIP Code

Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number 8 1 2 2

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Total claim	Priority amount	Nonpriority amount
\$ <u>2,000.00</u>	\$ _____	\$ <u>2,000.00</u>

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than four priority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
41	<p><u>Comenity Bank Bankruptcy Dept.</u> Nonpriority Creditor's Name</p> <p>P.O. <u>Box 183043</u> Number Street</p> <p><u>Columbus</u> <u>OH</u> <u>43218-3043</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>6 6 5 2</u> \$ <u>186.96</u></p> <p>When was the debt incurred? <u>various dates</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit card</u></p>

42	<p><u>Citi</u> Nonpriority Creditor's Name</p> <p>P.O. <u>Box 2001</u> Number Street</p> <p><u>Warren</u> <u>MI</u> <u>89193</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5 4 0 8</u> \$ <u>421.77</u></p> <p>When was the debt incurred? <u>various dates</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit card</u></p>
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43	<p><u>Citi</u> Nonpriority Creditor's Name</p> <p>P.O. <u>Box 790040</u> Number Street</p> <p><u>St. Louis</u> <u>MO</u> <u>63179</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>8 4 3 1</u> \$ <u>4,309.25</u></p> <p>When was the debt incurred? <u>various dates</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit card</u></p>
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Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.4	<u>Credit One Bank General Correspondence</u> Nonpriority Creditor's Name	Last 4 digits of account number <u>7 4 5 3</u>	\$ <u>1,140.23</u>
	<u>Box 98873</u> P.O. Number Street	When was the debt incurred? <u>various dates</u>	
	<u>Las Vegas</u> <u>NV</u> <u>89193-8873</u> City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit cards</u>	
4.5	<u>First Premier Bank</u> Nonpriority Creditor's Name	Last 4 digits of account number <u>8 0 5 1</u>	\$ <u>481.00</u>
	<u>3820 N. Louise Avenue</u> Number Street	When was the debt incurred? <u>various dates</u>	
	<u>Sioux Falls</u> <u>SD</u> <u>57107</u> City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>	
4.6	<u>Penn Dental</u> Nonpriority Creditor's Name	Last 4 digits of account number _____	\$ <u>605.00</u>
	<u>711 W. Lancaster Ave.</u> Number Street	When was the debt incurred? <u>2017</u>	
	<u>Bryn Mawr</u> <u>PA</u> <u>19010</u> City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>medical bills</u>	

Debtor 1 Todd L. Culbreath
 First Name Middle Name Last Name

Case number (if known) _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

1. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. \$ <u>10,000.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ <u>0.00</u>
	6e. Total. Add lines 6a through 6d.	6e. <div style="border: 1px solid black; padding: 2px; display: inline-block;">\$ <u>10,000.00</u></div>

		Total claim
Total claims from Part 2	6f. Student loans	6f. \$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ <u>7,518.21</u>
	6j. Total. Add lines 6f through 6i.	6j. <div style="border: 1px solid black; padding: 2px; display: inline-block;">\$ <u>7,518.21</u></div>

Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
 First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if living) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number _____
 (If known)

☐ Check if this is an amended filing.

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

2.1 Internal Revenue Service
 Priority Creditor's Name

Number _____ Street _____
P.O. Box 7346

Philadelphia PA 19101-7346
 City State ZIP Code

Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number 8 1 2 2

Total claim	Priority amount	Nonpriority amount
\$ <u>8,000.00</u>	\$ <u>8,000.00</u>	\$ <u>0.00</u>

When was the debt incurred? 1/1/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

2.2 Pennsylvania Department of Revenue
 Priority Creditor's Name

Dept. 280946
 Number Street

Attn: Bankruptcy Division

Harrisburg PA 17128-0946
 City State ZIP Code

Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number 8 1 2 2

Total claim	Priority amount	Nonpriority amount
\$ <u>2,000.00</u>	\$ _____	\$ <u>2,000.00</u>

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Debtor 1 Todd L. Culbreath Case number (if known) _____
First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than four priority unsecured claims fill out the Continuation Page of Part 2.

<p>41</p> <p><u>Comenity Bank Bankruptcy Dept.</u> Nonpriority Creditor's Name</p> <p><u>P.O. Box 183043</u> Number Street</p> <p><u>Columbus</u> <u>OH</u> <u>43218-3043</u> City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Total claim</p> <p>Last 4 digits of account number <u>6 6 5 2</u> \$ <u>186.96</u></p> <p>When was the debt incurred? <u>various dates</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit card</u></p>
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<p>42</p> <p><u>Citi</u> Nonpriority Creditor's Name</p> <p><u>P.O. Box 2001</u> Number Street</p> <p><u>Warren</u> <u>MI</u> <u>48193</u> City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5 4 0 8</u> \$ <u>421.77</u></p> <p>When was the debt incurred? <u>various dates</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit card</u></p>
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<p>43</p> <p><u>Citi</u> Nonpriority Creditor's Name</p> <p><u>P.O. Box 790040</u> Number Street</p> <p><u>St. Louis</u> <u>MO</u> <u>63179</u> City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>8 4 3 1</u> \$ <u>4,309.25</u></p> <p>When was the debt incurred? <u>various dates</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit card</u></p>
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Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.4	Credit One Bank General Correspondence Nonpriority Creditor's Name	Last 4 digits of account number <u>7 4 5 3</u>	\$ <u>1,140.23</u>
	P.O. <u>Box 98873</u> Number Street	When was the debt incurred? <u>various dates</u>	
	<u>Las Vegas</u> <u>NV</u> <u>89193-3673</u> City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit cards</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.5	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number <u>8 0 5 1</u>	\$ <u>481.00</u>
	<u>3820</u> <u>N. Louise Avenue</u> Number Street	When was the debt incurred? <u>various dates</u>	
	<u>Sioux Falls</u> <u>SD</u> <u>57107</u> City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.6	Penn Dental Nonpriority Creditor's Name	Last 4 digits of account number _____	\$ <u>605.00</u>
	<u>711</u> <u>W. Lancaster Ave.</u> Number Street	When was the debt incurred? <u>2017</u>	
	<u>Bryn Mawr</u> <u>PA</u> <u>19010</u> City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>medical bills</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 Todd L. Culbreath Case number (if known) _____
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim

4.7	<p>Temple School of Dentistry</p> <p>Nonpriority Creditor's Name</p> <p>3223 North Broad Street</p> <p>Number Street</p> <p>Philadelphia PA 19140</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>8 9 5 4</u></p> <p>When was the debt incurred? <u>2017</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Medical services</u></p>	<p>\$ <u>374.00</u></p>
4.8	<p>Nonpriority Creditor's Name</p> <p>Number Street</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify</p>	<p>\$</p>
4.9	<p>Nonpriority Creditor's Name</p> <p>Number Street</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify</p>	<p>\$</p>

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

1. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. \$ <u>10,000.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ <u>0.00</u>
	6e. Total. Add lines 6a through 6d.	6e. <div style="border: 1px solid black; padding: 2px;">\$ <u>10,000.00</u></div>

		Total claim
Total claims from Part 2	6f. Student loans	6f. \$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ <u>7,518.21</u>
	6j. Total. Add lines 6f through 6i.	6j. <div style="border: 1px solid black; padding: 2px;">\$ <u>7,518.21</u></div>

Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number
(if known) _____

☐ Check if this is an amended filing.

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1 Zerns Market
Name
1100 E. Philadelphia Avenue
Number Street
Gilbertsville PA 19525
City State ZIP Code

Store space for business

2.2
Name
Number Street
City State ZIP Code

2.3
Name
Number Street
City State ZIP Code

2.4
Name
Number Street
City State ZIP Code

2.5
Name
Number Street
City State ZIP Code

Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number
(If known) _____

☐ Check if this is an amended filing.

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☒ No
☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
☐ No
☐ Yes. In which community state or territory did you live? ___. Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1

Name

Number Street

City State ZIP Code

- ☐ Schedule D, line ____
☐ Schedule E/F, line ____
☐ Schedule G, line ____

3.2

Name

Number Street

City State ZIP Code

- ☐ Schedule D, line ____
☐ Schedule E/F, line ____
☐ Schedule G, line ____

3.3

Name

Number Street

City State ZIP Code

- ☐ Schedule D, line ____
☐ Schedule E/F, line ____
☐ Schedule G, line ____

Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:

Describe Employment

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

- ☒ Employed
☐ Not employed

Office Manager

Zerns Hearing Aids

1100 E. Philadelphia Ave.

Number Street

Store 024

Gilbertsville PA 19525

City State ZIP Code

6 yrs.

Debtor 2 or non-filing spouse

- ☐ Employed
☐ Not employed

Number Street

City State ZIP Code

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or non-filing spouse

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 3,266.00 \$ 0.00

3. Estimate and list monthly overtime pay.

3. + \$ 0.00 + \$ 0.00

4. Calculate gross income. Add line 2 + line 3.

4. \$ 3,266.00 \$ 0.00

Debtor 1 Todd L. Culbreath
 First Name Middle Name Last Name

Case number (if known) _____

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....→ 4.	\$ 3,266.00	\$ 0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 653.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: ..	5h. +\$ 0.00	+\$ 0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h	6. \$ 653.00	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 2,613.00	\$ 0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 1,221.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if know) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: ..	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: ..	8h. +\$ 0.00	+\$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	9. \$ 1,221.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 3,834.00	\$ 0.00 = \$ 3,834.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____ 11. + \$ 0.00		
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data. If it applies.	12. \$ 3,834.00	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes Explain: _____		

Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:
MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No.
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents

☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependent's names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

19

- ☐ No
- ☒ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes.

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)

Your Expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,219.31

If not included on line 4:

4a. Real estate taxes

4a. \$ 300.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

		Your Expenses
5.	Additional mortgage payments for your residence, such as home equity loans.	5. \$ 0.00
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. \$ 175.00
6b.	Water, sewer, garbage collection	6b. \$ 50.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 200.00
6d.	Other. Specify: _____	6d. \$ 0.00
7.	Food and housekeeping supplies	7. \$ 550.00
8.	Childcare and children's educational costs	8. \$ 20.00
9.	Clothing, laundry, and dry cleaning	9. \$ 30.00
10.	Personal care products and services	10. \$ 60.00
11.	Medical and dental expenses	11. \$ 170.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 220.00
13.	Entertainment, clubs recreation, newspapers, magazines, and books	13. \$ 100.00
14.	Charitable contributions and religious donations	14. \$ 0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. \$ 35.00
15b.	Health insurance	15b. \$ 140.00
15c.	Vehicle insurance	15c. \$ 80.00
15d.	Other insurance. Specify: _____	15d. \$ 0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ 0.00
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1	17a. \$ 0.00
17b.	Car payments for Vehicle 2	17b. \$ 0.00
17c.	Other. Specify: _____	17c. \$ 0.00
17d.	Other. Specify: _____	17d. \$ 0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from you pay on line 5, <i>Schedule I, Your Income</i> (Official Form B 6I).	18. \$ 0.00
19.	Other payments you make to support others who do not live with you. Specify: _____	19. \$ 0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i> :	
20a.	Mortgages on other property	20a. \$ 0.00
20b.	Real estate taxes	20b. \$ 0.00
20c.	Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d.	Maintenance, repair, and upkeep expenses	20d. \$ 0.00
20e.	Homeowner's association or condominium dues	20e. \$ 0.00

Debtor 1 Todd L. Culbreath
 First Name Middle Name Last Name

Case number (if known) _____

21. Other. Specify: _____ 21. \$ 0.00

22. Calculate your monthly expenses

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.

22c. Add lines 22a and 22b. The result is your monthly expenses.

\$	3,349.31
\$	0.00
22. \$	3,349.31

23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 3,834.00

23b. Copy your monthly expenses from line 22 above.

23b. -\$ 3,349.31

23c. Subtract your monthly expenses from your monthly income.
 The result is your *monthly net income*.

23c. \$ 484.69

24. Do you expect an increase or decrease in your expenses within the year after you file this form?:

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification in the terms of your mortgage?

- ☒ No.
☐ Yes.

Explain here:

Fill in this information to identify your case:

Case #
18-11155

Debtor 1 Todd L Culbreath
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Eastern District of Pennsylvania
Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

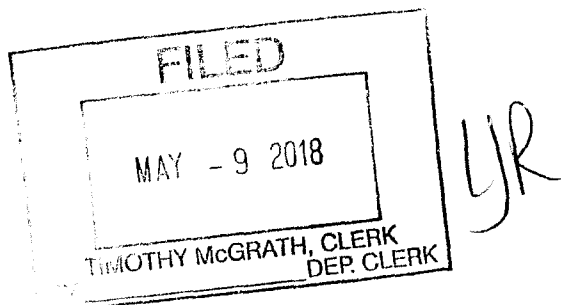
Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature
(Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x [Signature] **SIGN HERE**
Signature of Debtor 1 Signature of Debtor 2
Date 5/8/18 Date _____
MM/DD/YYYY MM/DD/YYYY



Fill in this information to identify your case:

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Eastern District of Pennsylvania

Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

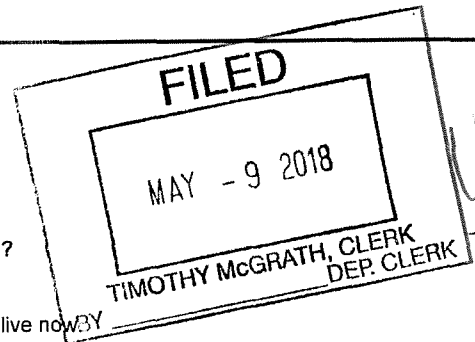
Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☐ Married
☒ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.



Debtor 1:

Dates Debtor 1 lived there

Debtor 2:

Dates Debtor 2 lived there

Number Street

From _____
To _____

Number Street

From _____
To _____

City State ZIP Code

City State ZIP Code

Number Street

From _____
To _____

Number Street

From _____
To _____

City State ZIP Code

City State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ <u>9,800.00</u>
For last calendar year: (January 1 to December 31, <u>2017</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ <u>30,000.00</u>
For the calendar year before that: (January 1 to December 31, <u>2016</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ <u>24,038.00</u>

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
☐ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
For last calendar year: (January 1 to December 31, _____) YYYY	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
For the calendar year before that: (January 1 to December 31, _____) YYYY	_____	\$ _____
	_____	\$ _____
	_____	\$ _____

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

1. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☒ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name _____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage
Number _____ Street _____	_____			<input type="checkbox"/> Car
_____	_____			<input type="checkbox"/> Credit card
City _____ State _____ ZIP Code _____				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other _____

		\$ _____	\$ _____	<input type="checkbox"/> Mortgage
Creditor's Name _____	_____			<input type="checkbox"/> Car
Number _____ Street _____	_____			<input type="checkbox"/> Credit card
_____	_____			<input type="checkbox"/> Loan repayment
City _____ State _____ ZIP Code _____				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other _____

		\$ _____	\$ _____	<input type="checkbox"/> Mortgage
Creditor's Name _____	_____			<input type="checkbox"/> Car
Number _____ Street _____	_____			<input type="checkbox"/> Credit card
_____	_____			<input type="checkbox"/> Loan repayment
City _____ State _____ ZIP Code _____				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other _____

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No

☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	\$ _____	
Insider's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	\$ _____	

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

☒ No

☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	\$ _____	
Insider's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	\$ _____	

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
☒ Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
<p>Mortgage foreclosure</p> <p>Case title <u>Homebridge Financial Service</u></p> <p><u>Culbreath</u></p> <p>Case number <u>2017-09275</u></p>	<p><u>Montgomery County Common Pleas</u></p> <p>Court Name</p> <p><u>P.O. Box 313</u></p> <p>Number Street</p> <p><u>Norristown</u> <u>PA</u> <u>19404</u></p> <p>City State ZIP Code</p>	<p><input checked="" type="checkbox"/> Pending</p> <p><input type="checkbox"/> On appeal</p> <p><input type="checkbox"/> Concluded</p>
<p>Case title _____</p> <p>_____</p> <p>Case number _____</p>	<p>_____</p> <p>Court Name</p> <p>_____</p> <p>Number Street</p> <p>_____</p> <p>City State ZIP Code</p>	<p><input type="checkbox"/> Pending</p> <p><input type="checkbox"/> On appeal</p> <p><input type="checkbox"/> Concluded</p>

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

Describe the property	Date	Value of the property
<p>Creditor's Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p> <p>Explain what happened</p> <p><input type="checkbox"/> Property was repossessed.</p> <p><input type="checkbox"/> Property was foreclosed.</p> <p><input type="checkbox"/> Property was garnished.</p> <p><input type="checkbox"/> Property was attached, seized, or levied.</p>	_____	\$ _____
<p>Creditor's Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p> <p>Explain what happened</p> <p><input type="checkbox"/> Property was repossessed.</p> <p><input type="checkbox"/> Property was foreclosed.</p> <p><input type="checkbox"/> Property was garnished.</p> <p><input type="checkbox"/> Property was attached, seized, or levied.</p>	_____	\$ _____

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

Creditor's Name	Describe the action the creditor took	Date action was taken	Amount
Number Street			\$
City State ZIP Code			

Last 4 digits of account number: XXXX-

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			

Debtor: Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			\$
			\$
Number Street			
City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			\$

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Michael W. Gallagher Person Who Was Paid		
401 West Johnson Highway Number Street		\$ 500.00
Suite 4		\$
East Norriton PA 19401 City State ZIP Code		
mwglaw@msn.com Email or website address		
Person Who Made the Payment, if Not You		

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

Person Who Was Paid

Number Street

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

\$

\$

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

☒ No

☐ Yes. Fill in the details.

Person Who Was Paid

Number Street

City State ZIP Code

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

\$

\$

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

☒ No

☐ Yes. Fill in the details.

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you

Debtor 1 Todd L. Culbreath Case number (if known) _____
 First Name Middle Name Last Name

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date transfer was made
_____	_____	_____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

Name of Financial Institution	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
_____	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
Number _____ Street _____				
City _____ State _____ ZIP Code _____				

Name of Financial Institution	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
_____	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
Number _____ Street _____				
City _____ State _____ ZIP Code _____				

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

Name of Financial Institution	Who else had access to it?	Describe the contents	Do you still have it?
_____	Name _____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Number _____ Street _____	Number _____ Street _____		
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

22 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility Number Street City State ZIP Code	Name Number Street City State ZIP Code	<input type="checkbox"/> No <input type="checkbox"/> Yes

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name Number Street City State ZIP Code	 	\$ _____

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of Site Number Street City State ZIP Code	 	_____

Debtor 1 **Todd L. Culbreath**
First Name Middle Name Last Name

Case number (if known) _____

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of Site	Governmental unit		
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		
City State ZIP Code	City State ZIP Code		

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Court name		
Number Street		
City State ZIP Code		
Case number		

Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☒ An officer, director, or managing executive of a corporation
☒ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business	Employer identification number Do not include Social Security number or ITIN.
Business Name	EIN: --
Number Street	
City State ZIP Code	
Name of accountant or bookkeeper	Dates business existed
	From To
Describe the nature of the business	Employer identification number Do not include Social Security number or ITIN.
Business Name	EIN: --
Number Street	
City State ZIP Code	
Name of accountant or bookkeeper	Dates business existed
	From To

Debtor 1 Todd L. Culbreath
First Name Middle Name Last Name

Case number (if known) _____

Business Name _____ Number Street _____ City State ZIP Code _____	Describe the nature of the business _____ Name of accountant or bookkeeper _____ Dates business existed From _____ To _____	Employer Identification number Do not include Social Security number or ITIN. EIN: -
--	--	--

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☐ No
☐ Yes. Fill in the details below.

Date Issued



Name

Number Street

City State ZIP Code

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

x   **SIGN HERE**
Signature of Debtor 1 Signature of Debtor 2
Date 5/8/18 Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of person _____ Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).